

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

3. LEASE DESIGNATION AND SERIAL NO.

LC-03740-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Eunice Monument South Unit

8. FARM OR LEASE NAME

Eunice Monument South Unit

9. WELL NO.

261 ~~WTH~~

10. FIELD AND POOL, OR WILDCAT

Eunice Monument G/SA

11. SEC. T. R. M. OR BLK. AND
SURVEY OR AREA

Sec 4 T21S R36E

12. COUNTY OR PARISH 13. STATE

Lea

NM.

1. OIL ☐ GAS ☒ OTHER injection

2. NAME OF OPERATOR

Chevron U.S.A. Inc.

3. ADDRESS OF OPERATOR

P.O. Box 670, Hobbs, New Mexico 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

Unit X 660' from South + 660' from EAST

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, AT, OR, ETC.)

3583'

16.

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

9/22 - 9/24 RAN GR/CCL SET 2SK SAND from 3867-3853' SET
Hydromite plug from 3853-3838' Perf'd 3648'-50';
3654'-56'; (8 holes 2JPF - 180°) ACD'2 W/3000 gals
16% TITR HCL.

9-25 Hydeo test +bg. Turn well over to production for
injection.

RECEIVED
SEP 27 11 27 AM '89
CARL...
AREA...

18. I hereby certify that the foregoing is true and correct

SIGNED

TITLE

Delq. Engr.

DATE

9/26/89

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

